PTO/SB/05 (01-04)
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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	AllureRx 0304
First Inventor	Clemie M. Lee
Title	Flavored Medicaments to Dete or Attract & Kill Microbes

(Only for new n	nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	79837214403			
	PPLICATION ELEMENTS er 600 concerning utility patent application contents.	ADDRESS TO: Commission P.O. Box 1	oner for Patents			
(Submit an a Applicant of See 37 CF 3. See 37 CF 3. Specification (preferred at 1 - Descriptive - Cross Reference or a computation - Reference or a computation - Brief Summan - Brief Summan - Brief Summan - Brief Summan - Abstract of 4. Drawing(s) - Abstract of 4. Drawing(s) - Abstract of 5. Oath or Declaration - Newly of the Copy for (for cordination - DEC) - DEC	Total Pages	ACCOMPANYING AF 9. Assignment Papers (cov. 10. 37 CFR 3.73(b) Statement (when there is an assign English Translation Doct Information Disclosure Statement (IDS)/PTO-14 13. Preliminary Amendment (IDS)/PTO-15 15. Certified Copy of Priority (if foreign priority is clair Nonpublication Request (b)(2)(B)(i). Applicant more of the priority is clair (b) (2)(B)(i) application and is not divisional application and is hereby the prior application, from which an oath and or divisional application and is hereby	Sequence Submission Form (CRF) Ince Listing on: D-R (2 copies); or I identity of above copies PPLICATION PARTS For sheet & document(s)) Interpretation of the sequence			
The incorporation <u>ca</u>	The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS					
Customer	Number:	OR Corre	spondence address below			
Name Cle	emie Lee					
Address	85 Mountain Crescent					
	one Mountain	State Georgia	Zip Code 30087			
Country US	"·	elephone 770-469-7833	Fax			
Name (Print/Type) Signature	Clemie M. Lee	Registration No. (Attorney/Agent)	Date 12 March 2004			

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 385.	00
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Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Clemie Lee			
Examiner Name				
Art Unit				
Attorney Docket No.	Allure Rx. 0304			

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:	Large E	ntity	Small	Entity		
Deposit Account:				Fee (\$)	Fee Description	Fee Paid
Account Number	1051	130	2051		Surcharge - late filing fee or oath	
Deposit Account	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name	1053	130	1053	130	Non-English specification	
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments		2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)		920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee	1805 1	1.840*	1805	1.840*	Requesting publication of SIR after	
to the above-identified deposit account.		.,010		.,0-10	Examiner action	
FEE CALCULATION		110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid Code (\$)	1254 .1	1,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee 385, 0	1255 2	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	16 5	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385000	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1	1,330	2453	6 65	Petition to revive - unintentional	
Fee from	1501 1		2501		Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims 20** = X	1502	480	2502		Design issue fee	
Independent 2** - Y	1503	640	2503		Plant issue fee	
Claims -3" =	1460	130	1460		Petitions to the Commissioner	
	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	\vdash
Code (\$) Code (\$)	8021	40	802 ⁻	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	3 85	Filing a submission after final rejection	
1201 86 2201 43 Independent claims in excess of 3	4.5.5				(37 CFR 1.129(a))	\vdash
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	J 385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)] [
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
		fee (sp	ecify)_			
SUBTOTAL (2) (\$) **or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				
C Provided y paid, ir grouter, i or i tolocado, dee above		_				

(Complete (if applicable)) SUBMITTED BY Registration No. Telephone Name (Print/Type) Date Signature

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